

Knollwood Energy of MA LLC P.O. Box 30 Chester, New Jersey 07930

January 12, 2016

Debra A. Howland Executive Director New Hampshire Public Utilities Commission 21 South Fruit Street, Suite 10 Concord, NH 03301-2429

Dear Ms Howland,

Enclosed please find applications for 12 systems to be part of the Knollwood Energy of MA LLC (NH-II-13-089) Class II Photovoltaic aggregation for New Hampshire Renewable Energy Certificates (RECs) generated from customer-sited sources, pursuant to New Hampshire Code of Administrative Rules Puc 2506.

Also enclosed are the Simplified Process Interconnection Application and Service Agreement, and the Certificate of Completion.

Electronic versions have been entered into the new online application system under batch number KN16003.

Jeff Egan

George Heavner

John Elkins

Susan Hemingway

Matt Erlick

Bobby Lambert - High St Solar

Albert Franz

Jeff Huckins

Justin Hart

John Straight

Bradford Hartwell

Stephen Rust

Please feel free to contact me with any questions or further instructions. Thank you for your consideration,

Linda Modica
New England REC Operations Manager
Knollwood Energy of MA LLC
973.879.7826
linda@knollwoodenergy.com

NH Public Utilities Commission

REC Aggregator Portal

New Users CLICK HERE to setup your account for this form. Creating an account enables you to partially complete the form and return later to finish it or to make changes after the form is submitted. Be sure to create your account BEFORE entering information into the form, or the information will be lost.

| the information will be lost. |
|---------------------------------|
| Existing Users CLICK HERE |
| Basic Information |
| Who is submitting this request? |
| Aggregator |
| Aggregator Batch Number |
| KN16003 |
| Executive Director email |
| PUC - Executive.Director |
| Aggregator name |
| Knollwood Energy |
| Aggregator Email |
| linda@knollwoodenergy.com |
| Other Aggregator name |
| |
| Other aggregator email address |
| |
| Facility Owner Name |
| John Elkins |
| Facility Owner email |
| mje570@gmail.com |
| Owner Phone |
| 603-744-0532 |

| 570 Hundred Acre Wood Rd Facility Town/City Bristol Facility State NH Facility Zip 03222 Is the facility address the same as the owner's malling address Yes No Mailing Address Mailing Town/City Mailing State Mailing State Mailing Zip Primary Contact (who should we call with questions) Linda Modica Contact Phone Other Email Address Facility Information Class II | Facility Address | |
|---|---|------|
| Bristol Facility State NH Facility Zip 03222 Is the facility address the same as the owner's mailing address Yes No Mailing Address Mailing Town/City Mailing State Mailing Zip Primary Contact (who should we call with questions) Linda Modica Contact Phone Other Email Address Facility Information Class II | 570 Hundred Acre Wood Rd | |
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| Contact Phone Other Email Address Facility Information Class | | |
| Contact Phone Other Email Address Facility Information Class | Primary Contact (who should we call with questions) | |
| Other Email Address Facility Information Class | Linda Modica | |
| Facility Information Class | Contact Phone | |
| Facility Information Class | | |
| Facility Information Class | Other Email Address | - |
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| Class | Facility Information | - |
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| Juilly | Class | _ |

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|--|--|------|
| To obtain a GIS ID contact: | | |
| James Webb | | |
| 408 517 2174 | | |
| jwebb@apx.com | | |
| GIS ID (include "NON") | | |
| NON54912 | | |
| Date of Initial Operation | | |
| 07/28/2015 | | |
| FWOAAlama &BLi- | | |
| Facility Operator Name, if applicable | | |
| | | |
| Panel Quantity | | |
| 60 | | |
| Denoi Maire | | |
| Panel Make | | |
| Solarworld | | |
| Panel Model | | |
| Sunmodule 280 | | |
| Daniel Batad Outrut | | |
| Panel Rated Output | | |
| 280 | | |
| System capacity based on panels | | |
| | | |
| 0.1680 | | |
| | | |
| the state of the s | | |
| Inverter Quantity 60 | | |
| Inverter Quantity | | |

| Add'l Inverter Quantity |
|---|
| NA |
| Additional Inverter Make |
| None |
| A delli leventen Mandal |
| Add'l Inverter Model |
| |
| Rated Output - Primary Inverter |
| 250 |
| Rated Output - Additional Inverter |
| |
| System capacity based an single inverter make |
| System capacity based on single inverter make 0.15 |
| |
| System capacity based on two inverter types |
| |
| System capacity in mW as stated on the interconnection agreement |
| 15.0 |
| Revenue Grade Meter Make |
| Irton Centron |
| Their Centroli |
| Was this facility installed directly by the customer (no electrician involved)? |
| O Yes No |
| Electrician Name & Number |
| Other |
| Other |
| Other Electrician Name & Number |
| Kim Frase 4146M |
| Installation Company |
| Frase Electric, LLC |
| |
| Other Installation Company Name |
| |

| Other Inst. Company Address |
|--|
| |
| Other Inst. Company City |
| |
| Other Inst. Company State |
| |
| Other Inst. Company Zip |
| |
| Independent Monitor Name & Company |
| Paul Button - Energy Audits Unlimited |
| Other Monitor Name and Company |
| |
| Is the installer also the equipment supplier? |
| YesNo |
| |
| Equipment Vendor |
| |
| Please attach your completed interconnection agreement including Exhibit B. |
| https://fs30.formsite.com/jan1947/files/f-5-99-5864102_Hr6KjmdM_Elkins_Interconnect_Phase_1.pdf |
| The project described in this application will meeet the metering requirements of PUC 2506 including: |
| Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independant minitor or a designated representative. |
| A revenue quality meter is used to measure the electricity generated. |
| The facility owner has certified to the independant monitor that the meter operaes according to manufacturing standards. |

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-168-5864102_0bmDOQYF_Elkins_Interconnect_Phase_2.pd

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-5864102_PQ9uYKci_Elkins_NHOS.pdf

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.

Jan

Print Name

Linda Modica

Date Signed

01/12/2016

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NEW HAMPSHIRE ELECTRIC CO-OP "BELOW THE GAP" INTERCONNECTION APPLICATION-RENEWABLE GENERATION UP TO 1000 KW

PURSUANT TO NEW HAMPSHIRE ELECTRIC COOPERATIVE TERMS & CONDITIONS, SECTION X. NET METERING AND THE NEW HAMPSHIRE ADMINISTRATIVE RULE PUC 900, APPLICANT HEREBY GIVES NOTICE OF INTENT TO INSTALL AND OPERATE A GENERATING FACILITY.

| Applicant Information | | | |
|---|--|---------------------|---|
| Name: John and Marion Elkin | IS | | Phase 1 |
| Mailing Address: 570 Hundred A | cre Wood Rd. | | |
| City: Bristol | State: NH | Zip Code: | 03222 |
| Facility Location (if different from abov | | | |
| Daytime Phone Number: 603-744-0 | 7002 | | |
| Distribution Utility: NH Electric C | | | |
| Electricity Supplier (ES): | | Account Numb | er: |
| Generating Facility Information | | | |
| Generator Type (check one): Solar V Generator Manufacturer; Model Name Number of Phases of Unit: Single T Generation output rating in AC & DC I Inverter Manufacturer, Model Name & Battery backup: Yes I No T Will a generator Disconnect Switch ac Proposed location of Disconnect Switch | & Number: SolarWor Three Other Kilowatts: 250x34=8. Number: Enphase 2 | 5KW AC 50 Microinve | 31101 |
| Installation Information & Certification Installer: Frase Electric LLC Installation Date: 7/28 Installing Electrician: Frase Electric Installing Electrician: Frase Electrician: 603-284 Daytime Phone Number: 603-284 | tion /// ctric LLC Hwy., South Tame | State of N | _ □ Check if owner-installed H License #: 4146M |

| Installation Information & Certification continued |
|---|
| The system hardware is listed to Underwriters Laboratories standards to be in compliance with UL1741 and IEEE 929-2000: |
| Signed (Vendor/Supplier): |
| Name (Printed): Kim Frase Date: 128/K |
| Company: Frase Electric LLC |
| Company Address: 789 Whittier Hwy., So. Tamworth, NH 03883 |
| The system has been installed in compliance with local Building/Electrical Code of City/County: Baistal 6/147 Signed (Electrician or Town Inspector): |
| Print Name: KIMFIRST - Electrician of Town Inspector). Date: 7/28/18 |
| *In lieu of signature by inspector, a copy of final inspection certificate may be attached. |
| The initial start-up test required by PUC 905.04 has been successfully completed by the electrician. Completed on: |
| Utility signature to signify only receipt of this form, in compliance with the Commission's net metering rules PUC 900. Signed (NHEC): |
| Print Name: |
| Signed (Electricity Supplier Representative): |
| Date:Interconnection Date:O 1970 |
| Applicant agrees to install and operate the system in accordance with PUC 900. |
| I hereby certify that, to the best of my knowledge, all of the information provided in this Application is true and correct. |
| Signature of Applicant: Date: 8-4-15 |
| THE ELIGIBLE CUSTOMER-GENERATOR SHALL PROVIDE NEW HAMPSHIRE ELECTRIC CO- OP WITH A WRITTEN UPDATE OF THE INFORMATION ON THIS FORM AS ANY CHANGES OCCUR. |

NEW HAMPSHIRE ELECTRIC CO-OP "BELOW THE CAP" NUMBER CONNECTION APPLICATION DENEWARD E CENERATION IN

INTERCONNECTION APPLICATION-RENEWABLE GENERATION UP TO 1000 KW

PURSUANT TO NEW HAMPSHIRE ELECTRIC COOPERATIVE TERMS & CONDITIONS, SECTION X. NET METERING AND THE NEW HAMPSHIRE ADMINISTRATIVE RULE PUC 900, APPLICANT HEREBY GIVES NOTICE OF INTENT TO INSTALL AND OPERATE A GENERATING FACILITY.

| Applicant Information | | | _ | |
|---|--|--|--------------------------|--|
| Name: John and Marion Elkins | | Phase 2 | | |
| Mailing Address: 570 Hundred Act | re Wood Rd. | | | |
| City: Bristol | State: NH | Zip Code: 0322 | 22 | |
| Facility Location (if different from above): Daytime Phone Number: 603-744-05 | | | | |
| Distribution Utility: NH Electric Co | ор | Account Number: | | |
| Electricity Supplier (ES): | | | | |
| Generating Facility Information | | | | |
| Generator Type (check one): Solar Wind Wind Generator Manufacturer; Model Name & Number of Phases of Unit: Single Through The Generation output rating in AC & DC Kill Inverter Manufacturer, Model Name & Number of Phases of Unit: Single Through The Generation output rating in AC & DC Kill Inverter Manufacturer, Model Name & Number of Phases of Unit: Single Through | Number: SolarW ree Other Othe | =6.5KW AC | 7.28KW PV | |
| Battery backup: Yes No Will a generator Disconnect Switch access Proposed location of Disconnect Switch, | ssible to the utility be if applicable: At A | installed? Yes No □ | | |
| Installation Information & Certification Installer: Frase Electric LLC | <u>n</u> | 0 (| Check if owner-installed | |
| Installation Date: 7/2 \$/2 Installing Electrician: Frase Electr | ic II C | State of NH Lice | nsa #. 4146M | |
| Installing Electrician: Flase Electrician: | AN SO Tamia | orth NH 03883 | lise m. | |
| Mailing Address: 789 Whittier Hy | 789., 50. Tallin | 0.01, 10. 0000 | | |
| Darting Phone Number: 603-284-6 | סוסכ | Service and the service and th | | |

Installation Information & Certification continued

| The system hardware is listed to Underwriters Laboratories sta IEEE 929-2000: | ndards to be in complianc | e with UL1741 and |
|--|--|----------------------------|
| Signed (Vendor/Supplier): | | |
| Name (Printed): Kim Frase | Date: | 2.8/15 |
| Company: Frase Electric LLC | | |
| 789 Whittier Hwy., So. I a | mworth, NH 03 | 883 |
| The system has been installed in compliance with local Buildin | 図にSTひし ng/Electrical Code of City/ | County: |
| Signed (Electrician or Town Inspector): | 3 | |
| Print Name: Kim GROSE | Date: | 7/28/18 |
| *In lieu of signature by inspector, a copy of final inspection ce | ertificate may be attached. | |
| The initial start-up test required by PUC 905.04 has been succ | essfully completed by the | electrician. |
| Completed on: 7/25/15 Wi | tnessed By: | we |
| Utility signature to signify only receipt of this form, in compi | iance with the Commissio | n's net metering rules PUC |
| Print Name: Cotto McNex | Date: | 8.4.15 |
| Signed (Electricity Supplier Representative): | | |
| Date:Int | erconnection Date: | 4.4.10 |
| Applicant agrees to install and operate the system in accordance I hereby certify that, to the best of my knowledge, all of the | nce with PUC 900. information provided in th | iis |
| Signature of Applicant. THE ELIGIBLE CUSTOMER-GENERATOR SHALL PROWITH A WRITTEN UPDATE OF THE INFORMATION O | Date: 8 OVIDE NEW HAMPSHIR ON THIS FORM AS ANY | RE ELECTRIC CO- OP |

New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor, or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

John Elkins

Printed Name of signature owner

Signature of system owner

Signature: Luda mod

Email: Linda@KnollwoodEnergy.com